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DEC 21 2005

Atty Docket No. 014801-002400US

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner David J. Lee

Group Art Unit 2633

**OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER David J. Lee**

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of John B. Roes et al., Application No. 10/066,099, filed February 1, 2002 for SECURE COVERT COMBAT IDENTIFICATION FRIEND-OR-FOE (IFF) SYSTEM FOR THE DISMOUNTED SOLDIER are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal Form
2. Amendment

Number of pages being transmitted, including this page: 15

Dated: December 21, 2005


Jeanette Olivera

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442

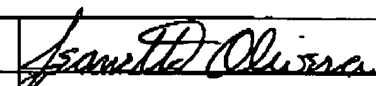
60664522 v1

PTO/SB/21 (09-04)

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/066,099	
	Filing Date	February 1, 2002	
	First Named Inventor	Roes, John B.	
	Art Unit	2833	
	Examiner Name	David J. Lee	
Total Number of Pages in This Submission	14	Attorney Docket Number	014801-002400US

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ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Townsend and Townsend and Crew LLP	
Signature		
Printed name	Raymond B. Horn	
Date	Dec 21, 2005	Reg. No. 44,773

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. 1-571-273-8300 on December <u>21</u> , 2005.		
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60864516 v1

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PATENT
Attorney Docket No.: 014801-002400US
Client Ref. No.: PD 514

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By: Jeanette Olivera
Jeanette Olivera

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

John B. Roes et al.

Application No.: 10/066,099

Filed: February 1, 2002

For: SECURE COVERT COMBAT
IDENTIFICATION FRIEND-OR-FOE
(IFF) SYSTEM FOR THE
DISMOUNTED SOLDIER

Customer No.: 20350

Confirmation No. 6030

Examiner: David J. Lee

Technology Center/Art Unit: 2633

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed September 21, 2005, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 9 of this paper.